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ABSTRACT

For people directly involved with vocational evaluation, rationale and guidelines are presented for developing individual evaluation plans (IEPs) to meet the needs of handicapped clients. Functions served by the IEP are discussed: (1) master plan of the purposes and objectives of an evaluation; (2) written record of the assessment techniques used, who was involved in carrying out the evaluation, and the extent to which specific goals were achieved, and (3) insurance that the client's unique needs are considered. The individual evaluation planning standards developed by the Vocational Evaluation and Work Adjustment Association (VEWAA) in 1977 are quoted and the individual components discussed: writing and individualizing the evaluation plan, identifying referral questions, specifying assessment techniques and methods, listing persons involved and role clarification, and plan review and modification. To illustrate the process referral information on a specific client from a field counselor is used to develop an individual evaluation plan. Four additional IEP formats are appended. (JT)

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The Individual Evaluation Plan

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THE INDIVIDUAL EVALUATION PLAN

Introduction

In 1975, Task Force No. 5 of the Vocational Evaluation Project set about on the job of developing standards for vocational evaluation. One of the most significant philosophies to emerge from this effort was that "vocational evaluation services shall be provided on a systematic, organized basis . . ." (Task Force No. 5, Vocational Evaluation and Work Adjustment Association Project, p. 72). In effect, this statement laid the foundation for the concept of evaluation planning because it clearly emphasized the need for a structured, purposeful approach to vocational assessment.*

The following year, the Vocational Evaluation and Work Adjustment Association (VEWAA) Standards Committee along with the Commission on Accreditation of Rehabilitation Facilities (CARF) developed a series of vocational evaluation standards. Some of these guidelines were directly related to individual evaluation planning. More recently (1978), the evaluation planning guidelines have been revised; however, they still essentially require that a written individual evaluation plan be developed for each client and that every plan clearly outline the purpose of the evaluation, the assessment techniques to be used, who will be involved, review dates, and plan modifications. (The specifics of the 1978 CARF standards related to evaluation planning will be discussed more thoroughly in subsequent parts of this publication.)

The concept of individual evaluation planning is not a new one. Yet there is still much confusion as to what evaluation planning means and how it may be practically applied. The purpose of this publication is to help people directly involved with vocational evaluation understand why individual evaluation planning is important and how it may be effectively practiced.

Paul McCray
November, 1978

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*In this publication the words "evaluation" and "assessment" will be used interchangeably.

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PART I

Rationale for Individual Evaluation Planning

Effective individual evaluation planning is an essential component of a comprehensive vocational evaluation process. It not only provides a master plan of the purposes and objectives of an evaluation, but also offers a written record of the assessment techniques used, who was involved in carrying out the evaluation, and the extent to which specific goals were achieved. Most importantly, however, it insures that the unique needs of every individual client are given special consideration and that there will be an organized attempt to satisfy those needs in the most effective and efficient manner possible.

Thus, a carefully developed individual evaluation plan (IEP) suggests that a directed, systematic series of events will take place which are designed to specifically meet the needs of the client and satisfy the demands of the referral source. Through the development of the IEP, the client, the referral source, and the evaluator obtain a concise picture of the overall individual client program.

In order to satisfactorily meet the changing needs and interests of the client, the IEP must always remain flexible and open to periodic review and modification. It is, therefore, an ongoing process beginning from the moment the client is referred to a facility for screening and ending when all the goals of the plan are satisfied to the maximum extent possible. When this is accomplished, the client, the referral source, and the evaluator should have a sound understanding of the client's most basic strengths and weaknesses.

Significance of Referral Information

There are many stages to individual evaluation planning, but perhaps the most significant prerequisite to good planning is the accumulation of meaningful referral information. One of the evaluator's primary responsibilities is to actively search for and obtain all pertinent background information in regard to a given client. This is not an easy task, for although much of this information should be available from the referral source, many times it will be incomplete. In these cases, it is essential that the evaluator contact all agencies and individuals that might be able to offer additional information about the client. Otherwise, the initial incomplete data may encourage an inaccurate or fragmented understanding of the client's needs, and this leads to ineffective planning.

Report No. 2, The Study Committee on Evaluation of Vocational Potential (1966), provides an example of a well documented referral. It is shown in Appendix A, pages 30-36. One can see that it clearly identifies the client's goals and needs:

1. He wants to develop a vocational objective.
2. He wants to work.
3. If necessary, he wants to train for a vocational objective, possibly communications or mechanics.
4. He wants to form new social relationships, particularly with girls.

It also specifies what the referral source wants to find out:

1. How does he adjust to new situations, individuals, and groups?
2. Does he apply his learning ability?
3. Does he adequately complete his assignments?
4. Is his limitation on writing a big obstacle?
5. What can he best do within his limitations?

In addition to the aforementioned information, a brief history of his vocational, social, educational, and personal development is included. The overall effect of such comprehensive referral information is that the evaluator gains a relatively clear picture of both the client's and the referral source's needs and can, therefore, plan effective ways to meet those needs.

Benefits of Individual Evaluation Planning

In a sense, the need for individual evaluation planning is relatively easily identified, for it seems obvious that many people can benefit from a structured approach to vocational assessment. First and foremost, the client profits from evaluation planning. By clearly identifying the purposes of the evaluation, the evaluator can explain to the client specific reasons why the evaluation is necessary. For the client, this gives meaning to the experience. For example, when an evaluee discovers that he is being tested in order to find out what his productivity is, his stamina, or to establish specific job goals, etc., the evaluation begins to take on personal meaning for him. No longer is he simply an uninformed and uninvolved subject to be studied and probed by a group of strangers. He is a central member of a team working to achieve specific goals. He knows why he is being evaluated and what can be expected.

Similarly, a client can learn why specific assessment techniques are important and why he should attempt to perform as well as possible. The client sees that a nuts and bolts sorting task is provided in order to find out if he can work on the production line at a local factory rather than to simply occupy him between break periods. Through the development of the IEP, the evaluator not only understands the rationale for each assessment procedure, but can also make this information available to the client. By providing the client with a sensible and understandable reason for each task, the client's performance is likely to be a more reliable reflection of his capabilities and interests since he will not mistakenly assume that a certain work sample is a meaningless "game" or that a particular psychometric test is simply boring.

Third, wasted time is reduced because only those assessment methods which can provide pertinent information directly related to the specific purposes of the evaluation are administered. Clients are not given ten different sorting tasks, all of which provide essentially the same information. Scheduling conflicts are eliminated so that clients do not spend countless hours sitting around waiting for other evaluees to finish assessment procedures which they were to have taken. Continuity among tasks is developed, and this tends to streamline the entire evaluation process, thereby encouraging the client to feel that he is actively involved in important activities rather than passively waiting for insignificant events to happen around him.

Finally, the client benefits in terms of gaining improved insight into the results and overall meaning of the evaluation. He begins to see relationships as to his needs, why he was referred, his performance, and the resulting interpretations offered by the evaluator.

For example, if the evaluator recommends that a client work as an auto mechanic, the latter can see that the idea evolved for specific reasons, e.g., (1) he expressed an interest in this area; (2) the counselor asked that his mechanical abilities be assessed; (3) he was tested on several measures of mechanical ability such as work samples, aptitude tests, and job site evaluations and scored above average on all of them; and (4) that there are many job opportunities for mechanics was discussed with him. Through this process, the evaluation results are made believable and understandable since a clearly identified series of events have been tied together in such a way as to lead to reasonable conclusions.

On the other hand, failure to develop a sense of continuity can lead to confusion and cause both the client and the referral source to lack confidence in the evaluator's decision making process, for if they cannot clearly see how the evaluator arrived at his conclusions, it is quite likely that any recommendations will only be lightly regarded. When this happens, the utilization of vocational evaluation services may diminish rapidly. However, with an IEP, it should be relatively easy for an observer to understand why certain evaluation procedures were implemented and how they lead to well substantiated recommendations.

Although thus far we have only discussed the benefits that accrue to the client, it should be noted that the referral source also benefits in several ways from individual evaluation planning. To a certain extent, evaluation planning requires the referral source to identify specific questions which he wishes to have answered. This process necessitates the referral source thoroughly examining a client's potential strengths and weaknesses; thus, in this case, evaluation planning indirectly encourages improved understanding of the client on the part of the referral source. It would, therefore, be most difficult for a client to be <u>appropriately</u> referred without the referral source having a sound perception of the former's needs.

In a more direct manner, evaluation planning will often save the referral source time and money. With planning, the amount of time a client spends in evaluation becomes primarily dependent upon how long it takes to reasonably achieve the goals and objectives of the plan. If only two days of evaluation are needed, that is all that is provided regardless of whether or not a particular facility has a standard two, three, or four week evaluation period. If the client spends additional time in evaluation simply because the program has a certain rigid time structure, then individual planning has not taken place since the needs of the client have been overshadowed by the structure of the program. Effective evaluation planning leads to a minimization of wasted time; thus, the client can move forward through the entire rehabilitation process as efficiently as possible. This means the referral source has more time to serve any additional clients who may have otherwise been neglected because of a stagnant system. Reduction in wasted time also leads to more productive utilization of facility personnel, material savings, and improved overall management. Facility costs are reduced and this savings is passed on to various referral sources who may then use these additional funds to serve more clients and place more handicapped workers in employment.

The referral source also benefits from evaluation planning in that the client is only given the services for which he was referred. Because the IEP is a written record of the evaluation process, the referral source may easily determine if any additional, unwarranted services were provided, and if so, for what reasons. Likewise, he may also determine if all the services he requested were provided, and if not, was it due to program limitations, evaluator oversight, etc.? Thus, the quality and efficiency of the evaluation program are opened for the referral source's scrutiny.

Finally, the planning process helps the referral source gain a better understanding of the capabilities and limitations of a particular evaluation program. For example, a referral source may have a question about a high level client's potential to work in a professional or technical job area such as electronics engineering, yet the facility is only set up and equipped to provide evaluations for a mentally handicapped population. In such a case, careful planning will prevent such an inappropriate referral since both the evaluator and referral source will recognize that the unit lacks any assessment techniques or instruments for properly addressing the client's needs. Conversely, a referral source may assume an evaluation unit is not staffed to answer certain questions which in actual practice it does everyday. For example, a facility might be able to provide sophisticated psychological evaluations for which the referral source thought he would have to search elsewhere. By understanding the role of the facility, the likelihood of inappropriate referrals or failure to utilize a facility's services is reduced. Individual evaluation planning facilitates this understanding, for it provides a means whereby referral source and evaluator communication is enhanced because the evaluator must inform the referral source as to what the program can and cannot provide.

The third party to benefit from evaluation planning is the vocational evaluator. Through the identification of specific goals and objectives which define the purposes of an evaluation, the evaluator becomes aware of what his specific responsibilities are in regard to a certain client. Client objectives become concrete and often times measurable, e.g., the evaluator is to determine a client's productivity, punctuality, attendance, etc.

Wasted time on the part of the evaluator is reduced since he eliminates the duplication of information and exploring areas irrelevant to the stated purposes of the evaluation. Most importantly, the evaluator becomes accountable for the entire evaluation process. Because specific goals and objectives are outlined, it becomes fairly easy to determine to what extent they were achieved. The methods and techniques the evaluator uses to reach the goals are available for peer review, and if the evaluation objectives are not met, one may determine to what extent this was due to evaluator error rather than simply blaming poor results on "unmotivated" clients or "inappropriate" referrals. Korn (1976) notes that "simplification of evaluator job tasks is a major contribution of the Evaluation Planning Model" (p. 65). Simplification of evaluator tasks is reflected in terms of efficient client scheduling and improved decision making based on an analysis and synthesis of meaningful and organized data.

Additionally, at the conclusion of an evaluation, the IEP provides the evaluator with a concise record of the entire evaluation process. This is useful for report writing since it can provide a succinct abstract of the client's limitations and capabilities in regard to the overall goals of the

evaluation. Thus, the IEP may not only improve the quality of individual reports, but it will often prove to be a useful tool for reducing the amount of time the evaluator spends on report writing.

Finally, a facility which provides evaluation services is likely to benefit from individual evaluation planning. As mentioned earlier, the IEP reduces wasted time on the part of the client as well as the evaluator. Reduction in wasted staff time as well as materials waste contributes to improved management which results in lower costs for services. When costs are reduced, other referral sources which could not previously afford evaluation services may find that they can then utilize the service. Similarly, referral sources which are already utilizing evaluation services may find that they can do so on an increased scale and because more clients can be served, waiting lists are reduced, thereby facilitating more immediate client involvement. These factors lead to a regular and increased utilization of services which contributes to program stability.

Additionally, individual accountability on the part of the evaluator leads to program accountability for the facility. Just as one may discern to what extent individual client objectives are being met, one may also accumulate data as to how well the evaluation program as a whole is satisfying its objectives. This is a first step towards program evaluation. Through this process, good programs are likely to provide useful services and, thereby, be reasonably well utilized while unsuccessful programs will not be used.

From the aforementioned discussion, one can see that the client, the referral source, the evaluator, and the facility all benefit from individual evaluation planning. Perhaps this is due to one reason more than anything else--communication. Evaluation planning facilitates, indeed almost mandates, that communication take place among all these parties. This is not, however, one-way communication coming down from the referral source to the evaluator and, finally, to the client. Instead it is open communication designed to instill and elicit significant information which will assist in meeting the needs of the client first of all, and then the referral source, evaluator, and facility.

Some of the results of effective evaluation planning have been discussed; it will suffice to say that only when the client understands why he is being evaluated, the referral source knows what he wants to find out, and the evaluator knows how to obtain the requested information in as effective and efficient a manner as possible, can the needs of the individual client be met and understood in all of their complexities.

PART II

Individual Evaluation Planning Standards

In 1977 the Vocational Evaluation and Work Adjustment Association recommended that five guidelines, directly related to individual evaluation planning, be adopted by CARF. They read as follows:

3.4.3.1.1.3 Based on referral information, the initial interview, and the stated purpose of the evaluation, a specific written evaluation plan for each individual shall be developed. This plan shall:

a. identify the questions to be answered through evaluation

b. indicate how these questions will be answered

c. where appropriate, specify persons (staff, family, etc.) who will be involved in carrying out the plan. There should be evidence that these individuals are aware of their role in carrying out this plan.

d. be periodically reviewed and modified as necessary. (p. 5)

As of July 1, 1978, this standard is now one of the requirements for CARF accreditation of vocational evaluation programs; however, much confusion still exists as to the meaning of some of these guidelines. Indeed, CARF surveyors have indicated that some clarifications are needed; therefore, the following interpretations were approved by the VEWAA Executive Council, April, 1977, and adopted by CARF.

3.4.3.1.1.3 (interpretation) The written evaluation plan should document the specific purpose of the evaluation (e.g., to determine if the individual is capable of gainful employment; to assess the individual's potential to be trained as a stock clerk; to determine why the individual has not been able to hold a job).

3.4.3.1.1.3a (interpretation) The written evaluation plan should identify specific questions (hypotheses) that are to be answered during the client's evaluation program. Examples might be:

"how much functional reading skill does the individual have?"

"how long can the individual stand at a work station?"

"is the individual's dexterity adequate to operate _____ hand tools?"

"can the individual manage money well enough to live independently?"

3.4.3.1.1.3b (interpretation) The plan should identify in writing which evaluation techniques, assessment tools, or procedures will be used to answer the various questions raised. For example:

"measurement of functional reading--Gates-MacGinitie - Form B"

"standing tolerance - U-Bolt Assembly - 2 days"

"hand-finger dexterity - Purdue Pegboard, Crawford Small Parts"

"money management - ABC Money Management Work Sample" (p. 5)

3.4.3.1.1.3c No interpretation offered.

3.4.3.1.1.3d No interpretation offered.

From the aforementioned information one can see that five clearly differentiated components make up the individual evaluation plan. It should also be noted that the guidelines emphasize the documentation of specific information rather than generalities. Perhaps the best way of gaining a more thorough understanding of these standards is to examine each one individually.

Writing and Individualizing the Evaluation Plan

The opening statement, 3.4.3.1.1.3, suggests three important points:

1. The IEP is to be written.
2. The IEP is to be tailored to the needs of the individual.
3. The IEP is to be based on a comprehensive view of the client which develops from at least three different perspectives: referral information, interviews, and knowledge of the overall purpose of the evaluation.

The first point clearly emphasizes that it is not enough for evaluators to have a general evaluation plan floating around in their heads. The plan must be written, and equally important, it should be done in such a way that an outside observer could review it and tell what was done, why it was done, and who was involved. Keep in mind that individual evaluation planning is useless unless it is done effectively. It should never be practiced just for the sake of satisfying administrative or program requirements, rather, meeting the needs of the client should always be the primary consideration.

Developing IEP's should not be a time-consuming process. At most, it should not occupy more than five or ten percent of an evaluator's time, and this factor can easily be figured into the cost of providing evaluation services. Additionally, because individual planning leads to streamlining the entire evaluation process, wasted time on the part of the evaluator and client is likely to be significantly reduced, and this will often more than make up for the time spent writing out the plan. More importantly, having only a rough plan in mind, as opposed to a written IEP, is an unnecessarily haphazard approach which is potentially detrimental to the development of a valid and reliable understanding of the client's limitations and capabilities. Without a written IEP, an evaluator may easily forget to explore areas that deserve consideration, or he may fail to examine them thoroughly. The end result is that some of the client's needs are neglected. However, expertise in the area

of individual evaluation planning insures that vocational evaluators will meet their professional responsibility of serving all the needs of each client in the best possible manner.

The second point is important in that the primary justification for individual evaluation planning is that the unique needs of the individual are better served. Evaluation planning is not designed for the purpose of meeting the needs of a particular program, facility, or broad group of clients. This type of approach can easily lead to a standardization of evaluation plans with little consideration being given to the needs of the individual client. One can almost picture evaluators mechanically producing rigidly standardized plans which require the client to adjust his needs to the program rather than vice versa. Because the abilities and limitations of most rehabilitation clients are so unique and complex, the IEP, as well as the entire evaluation process, must be tailored to the needs of the individual or one loses sight of the purpose of rehabilitation: to help individuals achieve their maximum potentialities.

Finally, the third point suggests that one's understanding of a client, which provides the basis for evaluation planning, must be based on several different sources of information. It is not enough to simply accumulate reams of referral information about a client and then assume one understands his needs. Similarly, a short interview with an individual rarely provides a complete picture of his social, vocational, and personal potentialities and limitations. But when these two procedures are combined, one may gain significant insight into the special needs of the client. Add to this the evaluator's knowledge of the overall purpose of the evaluation and a clear-cut course of action begins to take shape.

It is imperative that the referral source make a concentrated effort to thoroughly determine the needs of the client prior to referring the client for vocational evaluation services. By doing this, the referral source justifies the need for evaluation services as well as provides a base of information upon which the evaluator may build once the vocational evaluation process begins. Once this occurs, it is then the responsibility of the evaluator to synthesize the information in such a way that a comprehensive picture of the client's needs, strengths, and limitations, as well as why he requires evaluation services, emerges.

Identifying Referral Questions

Part "a" of the standard refers to identifying the specific questions that are to be answered by the evaluation process. As has already been discussed, these are commonly called referral questions, and they will initially be asked by the referral source. However, later on in the planning, the evaluator may ask additional questions based on his review of the referral information or observations of the client.

One might generally define a referral question as a statement of uncertainty in regard to an individual's functional abilities or interests in a specific area such as ability to get along with co-workers, vocational interests, productivity, job skills, aptitudes, etc. In other words, the referral source or the evaluator are unsure of an individual's specific capabilities or interests; therefore, vocational evaluation techniques are used as tools to answer the questions.

Referral questions need not be lengthy or complicated. Indeed, questions written in such a way as to allow for yes or no answers often elicit the most straightforward answers. For example, suppose a referral source has placed several clients in the job of clerk typist, and a new client indicates a strong interest in this area but has no typing skills. The most basic requirement of the job is that a prospective applicant be able to type at forty words per minute. Before investing time and money in training the client to be a clerk typist, the referral source might first refer the client for vocational evaluation services and ask the question, "If enrolled in the ABC typist training program, will Ms. Smith be able to achieve a forty words per minute typing rate?" Assuming that the evaluator is familiar with the ABC program and has the appropriate typing assessment tests, this question is relatively easily answered.

On the other hand, if the question were to read, "What are Ms. Smith's typing skills?" some obvious degree of specificity has been lost and the resulting evaluation and recommendations are likely to be equally general. The main point to keep in mind, in regard to referral questions, is that they should be as concrete and as specific as possible since vague questions tend to elicit obscure answers.

Additionally, if the referral source fails to outline any referral questions or they are of such a nature as to be vague or confusing, then the evaluator should not hesitate to contact the referral source and ask for clarification. The referral source may then choose to develop the appropriate referral questions or he may request that the evaluator use his professional expertise to develop the questions. The latter case is not uncommon, particularly in instances where referral sources may lack knowledge of rehabilitation practices, e.g., schools, manpower programs, mental health settings, etc.

Refer to Appendix A, page 31, Section 2, Programming, for an example of several relatively well-defined referral questions. In this case, the counselor has stated what he wants to find out about the client. One can see that these referral questions are brief, to the point, and stated in such a way that at the conclusion of the evaluation it should not be difficult to determine to what extent the questions were answered.

Note that some of the questions are relatively specific, whereas, other questions might be considered more general. In these cases, the evaluator may choose to contact the referral source and ask him to further clarify the questions. For example, with regard to the first question, "How does he adjust to the new situation, individuals, and groups?" the referral source might explain that what he specifically wanted to find out was how the client reacts to high pressure individual and group work activities. On the other hand, the referral source may simply want general observations as to the client's overall social and personal skills, and thus, the original question would be adequate. Whatever the case may be, the evaluator must be certain that he understands exactly what information the referral source is requesting prior to initiating the testing.

Generally speaking, for each referral question asked, the evaluator will usually have to ask a series of more specific questions, which when answered will also provide the answer to the original referral question. For example, if the referral source asks the question, "Can Mr. Shaw work as an auto mechanic?" the evaluator must then find answers to a series of questions which

will ultimately tell him if the client can work as an auto mechanic. Look at the example noted below:

I. Can Mr. Shaw work as an auto mechanic?

   A. Can he lift heavy objects?
   B. Is his range of motion limited?
   C. Do noxious odors adversely affect his health?
   D. Can he manipulate large and small hand tools?
   E. What is his mechanical aptitude?
   F. Does he have any work experience as an auto mechanic?
   G. Does he follow safety rules?
   H. Does he work well with little supervision?
   I. Is he interested in working with things as opposed to data or people?

By answering each of these sub-questions, the evaluator is determining if the client can work as an auto mechanic. One can see that this list of sub-questions could be very long, and for this reason, each of the sub-questions, or factors to be considered in answering a specific referral question, need not be written out on the IEP. However, each of the broader referral questions must be identified on the IEP, and it is recommended that somewhere in the record of the evaluation process, the evaluator make a list of sub-questions related to each referral question. Even though the sub-questions may be numerous, it often will not be necessary to answer all of them. For example, if in the above case we found that the client did not have the manual skills to effectively manipulate large and small hand tools, then it is highly unlikely that he could work as a mechanic, so many of the remaining sub-questions would be dispensed with.

An important point to consider in the development of referral questions is what happens when, through his review of the referral information and interviews with the client, the evaluator develops referral questions of his own which were not identified by the referral source, but seem important to fully understanding the client.

For example, suppose an evaluator notes that over the last five years a client has never held a job for more than six months; however, the referral source has made no reference to this fact and has limited his referral questions to assessing the client's clerical skills. Under this condition, should the evaluator include as part of the IEP, answering the referral question, "Why has Mr. Black been unable to hold any recent jobs for more than six months?" or should this question be ignored in the name of limiting the evaluation to answering only the referral source's questions? The answer is if the evaluator feels that answering an additional referral question, which was not specified by the referral source, will help better meet the needs of the client, and exploring it will not radically change the evaluation process in terms of purposes and time, then the evaluator should make every attempt to answer any additional referral questions which he might have.

On the other hand, if it is probable that exploring the additional questions will cause considerable change in the evaluation, then the referral source should be contacted and the situation discussed before the assessment proceeds. If the referral source indicates that he does not need or want

answers to any questions other than those he outlined, then it is the responsibility of the evaluator to confine the evaluation process to answering only the referral source's questions.

This, however, does not mean that the evaluator's responsibility is to convey only that information to the referral source which is directly related to the referral questions. Instead, the evaluator has a professional responsibility to share all the results of the evaluation with the referral source.

For example, if an evaluator unexpectedly finds that a client has a problem, such as the inability to work in groups, which the referral source has no knowledge of and made no reference to in his referral questions, the evaluator should certainly share that information with the referral source. It is usually advantageous to keep the referral source informed of any significant findings which may or may not be directly related to the referral questions, since this increases his understanding of client needs as well as facilitating communication between referral source and evaluator.

Specifying Assessment Techniques and Methods

Point "b" of standard 3.4.3.1.1.3 indicates that a written record of all the assessment procedures should be maintained. However, this does not mean that all that is required is to simply keep a running record of each assessment technique used and their administration dates. Rather, it implies that the evaluation procedures used should be appropriate for the individual and the questions to be answered. Accountability is suggested.

For example, suppose a referral source has a client who cannot read and the referral question is, "Can Jack Jones work competitively as a custodian?" The referral source also notes that he has a potential custodial job, which does not require reading, waiting for the client if he shows ability in this area. The evaluator then proceeds to note in his evaluation plan that he will give the client the custodian work sample which requires a third grade reading level. Has the evaluator made a written record of the procedure to be used? The answer is yes, but he has not done so with sufficient consideration of the needs and limitations of the client because the client probably can't read the material well enough to perform the required tasks, and the job does not require reading. Therefore, decisions based on the results emanating from this plan are dubious. Such an approach is not going to be effective in terms of meeting the needs of the client although administrative requirements related to record keeping may be satisfied. On the other hand, if the evaluator noted in the plan that he was going to administer the custodian work sample, but substitute oral instructions for the written instructions, then he is not only satisfying record keeping requirements, but also suggesting that he is aware of the client's special needs. This indicates professional competence on the part of the evaluator.

Besides encouraging the provision of effective assessment techniques, guideline "b" also requires that the evaluator determine whether or not he has the assessment tools to answer a given referral question. For example, suppose a referral source wants to know if a client can work as a radio-TV repairman. Yet when the evaluator attempts to choose the evaluation technique which will answer this question, he finds that he lacks the appropriate assessment tools because he cannot clearly identify any specific techniques which will answer

the question. When this happens, the referral source should be informed, since this could have a significant impact on the purpose of the evaluation. In this case, the referral source may decide not to send the client or choose to refer him to another facility. In either case the needs of the client will be better served, since the evaluator will not have chosen unreliable assessment methods which really cannot answer the referral questions asked. This also reflects sound professional judgement on the part of the evaluator and is likely to facilitate confidence on the part of the referral source, with the evaluation program.

Evaluation techniques may vary considerably. oftentimes depending upon the expertise of the evaluator and the objectives of the facility; therefore, they should not be limited to just work sample or psychological testing. Other assessment procedures are equally useful. They may include job sites, situational assessment, interviewing, and counseling. Each of these techniques can be effective when used for specific reasons with particular goals in mind. However, regardless of the method used, it should be noted in the IEP. For example, if an evaluator wants to determine a client's potential to work in retail sales, a job site evaluation might be the most effective method, and it should, therefore, be recognized as an assessment technique. Regardless of the type of assessment technique used, it should always be clearly identified. For example, when using commercial work sample systems it is not advisable to simply describe each of the assessment techniques used as Singer, JEVS, TOWER, Valpar, etc. Instead, the specific work sample or component which is going to be administered should be identified, e.g., Valpar: Simulated Assembly Work Sample #8, or TOWER: Mail Clerk Evaluation No. 1. This provides a much more precise description of the individual assessment procedure.

Listing Persons Involved and Role Clarification

Guideline "c" emphasizes that it is essential for each and every individual in the evaluation process to know what his role is. Primary involvement will generally be with the facility staff such as evaluators, psychologists, counselors, floor supervisors, etc. However, there will be many occasions when other people will have significant roles in the evaluation. If everyone does not recognize the importance of their roles, the evaluation may be adversely affected.

For example, suppose a client is referred for evaluation and he is accepted with the understanding that transportation will be provided by his parents. However, the evaluator fails to inform the parents of their role; instead he relies on the client to communicate the information to the parents. Consequently, the first four days of evaluation the client consistently arrives late in the morning. By the fifth day he fails to show up at all, so the evaluator finally decides to contact the parents whereupon he learns that the client told them that it was all right to be 20 to 30 minutes late and that the evaluation was over after four days. In this case, individuals who had significant involvement in the evaluation were never adequately informed of their roles and responsibilities. The result was the provision of a disrupted, poorly planned service which probably only served to further confuse any understanding of the client.

Failure to inform staff members of their roles can be even more damaging. Picture the hapless client who the evaluator sends to psychological services

for personality assessment. But when the client arrives, he is informed that there is no record of any appointment or requested tests, so he is "ping-ponged" back to the evaluator who then hurriedly tries to set up a test date before the vocational evaluation ends. It is easy to see how a client in such a situation could become bewildered and lose confidence in the entire evaluation process.

Primary responsibility for insuring that all parties are aware of their roles lies with the vocational evaluator, for he should be the one individual who coordinates and plans all activities in an organized and efficient manner. By making people aware of their responsibilities, the evaluator is taking a course of action which will facilitate the occurrence of a smooth and orderly sequence of events. There are many ways of informing people of their roles and making sure that they understand their responsibilities. If several people are to be involved with a client, it may be advantageous to hold a formal staffing and clarify each person's role. Minutes of the staffing may be sent to other members that will be involved, or if only one or two people will be working with a client, the evaluator might meet with each of them, discuss their roles, and ask them to sign the IEP. Whatever method is used, the important point is that people who are to be involved in the plan must not only be identified, but they must understand their responsibilities.

Role clarification among staff members is also particularly important because of many of the clients referred for vocational evaluation. Manipulative, aggressive, or dependent clients may inadvertently be encouraged to act out their maladaptive behaviors if all those involved are not aware of their roles. By knowing their responsibilities, significant others provide a structured setting in which the evaluation can progress systematically.

Plan Review and Modification

Section "d" of standard 3.4.3.1.1.3 implies that the evaluation plan is to be flexible and open to modification throughout the entire evaluation process. It should be regularly reviewed in order to assess progress in terms of meeting the stated goals, satisfying time limitations, and insuring that the plan is being carried out in an organized manner. It must also be adaptable enough so as to meet the client's needs as they change.

Generally speaking, after the evaluator has reviewed the referral information, he will begin to write the plan. This will usually take place before the client arrives at the facility; however, this is only a portion of the plan and it will usually be expanded or modified once the client arrives. For example, during the initial interview the client may express an interest in a job area which was not indicated in the referral information and, therefore, not noted in the IEP. In this case, the evaluator should modify the IEP to include assessment in the newly relevant area.

In other cases, the IEP may indicate that the evaluator plans to give a series of work samples designed to assess a client's mechanical skills. However, after the initial mechanical test, it becomes apparent that the client is severely limited in this area, thus, the amount of time given to further assessment should be reduced, and the plan would, therefore, be modified to eliminate some of the previously scheduled assessment techniques.

A third example is related to plan review. During the initial stages of IEP development, the evaluator may note that he plans to review the IEP at the midpoint of the evaluation. However, when the client arrives, his behavior is so disruptive and his performance so erratic that the evaluator decides to review the plan on a daily basis. Such a change reflects a significant modification of the IEP.

If significant changes in the original plan are necessary in terms of changing goals or increased evaluation time, the referral source should be contacted and the suggested changes discussed. Most modifications are reasonably justified when they are attempts to better meet the needs of the client or referral source. Flexibility throughout the entire planning process is an integral characteristic of effective individual evaluation planning.

From the previous discussion it should be understood that these five components are the core requirements for individual evaluation planning. These are the criteria which CARF utilizes in assessing the evaluation planning aspects of a program. However, there are several other factors which facilities may wish to incorporate as part of their evauation planning program. They may include:

1. Identifying demographic data such as name, age, disability, education, sex, etc.
2. Specifying the evaluation period.
3. Noting test administration dates.
4. Outcomes codes for each referral question such as:

   (4a) Yes, the referral question was answered by vocational evaluation.
   (4b) No, the referral question was not answered by vocational evaluation.
   (4c) Additional time is needed to answer the referral question by the evaluation process.
   (4d) This referral question cannot be answered by any available evaluation processes. (Thomas, 1978)

5. Test scores and results.
6. Explanations of plan modifications.

By including this additional information as part of the individual evaluation plan, the evaluator identifies related supportive information which contributes to the overall picture of the client and his performance. The IEP format a facility utilizes should be based on the needs of the clients, program goals, and evaluator expertise; therefore, many different kinds of formats may be used effectively.

In this part, we have discussed the essential components of the individual evaluation plan as well as offered interpretations and examples of each portion of the standard. One can see that each guideline may be clearly distinguished and that they were developed by professionals in the fields of vocational evaluation and work adjustment who recognized that the individual needs of the client could best be met through a systematic approach to assessment. This observation was supported by CARF who adopted these guidelines as evaluation planning standards for vocational evaluation programs.

Several important points related to individual evaluation planning were noted. First of all, planning must be flexible and tailored to individual client needs. Second, the IEP must be written and it must meet certain criteria if it is to satisfy CARF standards. Third, there are other factors not specified in the guidelines which facilities may choose to include as part of their planning process. Examples include: noting demographic data, outcomes codes, evaluation periods, etc. Last and most important, individual evaluation planning should be carried out for the purpose of better meeting client needs rather than simply satisfying administrative requirements.

Although each of the guidelines is designed to serve many different purposes, the overall effect of vocational evaluators actively practicing effective individual evaluation planning is that clients will receive professional vocational evaluation services which are specifically designed to meet their unique and special needs.

PART III

The Individual Evaluation Planning Process

Having already discussed why individual evaluation planning is important and what the essential components are, we may now move on to looking at how evaluation planning is actually practiced. In this section we will use the referral information offered in Appendix A to develop a written individual evaluation plan following the format offered in Appendix B, page 37. It should be noted, however, that Appendix B is only a sample format and is not presented for the purpose of serving as a "model" IEP. Examples of other formats may be found in Appendices C, D, or E, and facilities are encouraged to develop formats which better meet their individual needs.

Once a client is screened by a facility and accepted for vocational evaluation services, a step-by-step process begins which will ultimately lead to the creation of an individual evaluation plan. Although, for this exercise, these steps will be described as if they were separate and independent processes, it should be noted that in actual practice there will often be considerable overlap among steps. For example, plan review and modification may take place throughout the entire planning process, although they are described within this context as independent functions.

Step 1: Accumulation of Referral Information

As mentioned previously, one of the most important prerequisites to effective evaluation planning is the acquisition of comprehensive and meaningful referral information. This step is important because referral information provides the data which shapes the evaluator's initial understanding of the client and his needs. Incomplete information will at best provide only a partial picture of the client's needs, and at worst it may promote the development of an inaccurate understanding of the client.

Always keep in mind that the referral source has primary responsibility for gathering background information and seeing that the evaluator receives whatever data is needed. This will generally include medical, psychological, educational, vocational, personal, and social histories. However, should the referral source fail to or be unable to provide the necessary information, then the evaluator must assume much of the responsibility for securing meaningful and accurate background information. Thus, the evaluator must never assume a passive role wherein he simply sits back and waits for all the necessary information to appear on his desk. Ideally, there will be a cooperative effort between the referral source and the evaluator with the former sharing all available information with the evaluator who then proceeds to obtain any additional information which he feels is necessary. Many times the referral source will have very little background information on a particular client, and in these cases, if the needs of the client are to be fully understood, the evaluator must obtain additional information even without the aid of the referral source.

For example, the referral information provided to an evaluator from a referral source might only indicate that a client has a learning diability. In this case, the evaluator would be well advised to contact the referral source and ask for additional explanation. If the referral source does not

have any more specific information in this regard, the evaluator should contact the appropriate school authorities, psychologists, teachers, parents, etc., to determine exactly what the term means. With only the initial referral information, the evaluator does not know whether the handicap is related to behavioral disorders, speech, hearing, vision, etc.

Appendix A is an example of thorough referral information which was provided to an evaluation unit by a rehabilitation counselor. Note that at the bottom of the page along with this information, the counselor forwarded medical, psychological, and educational records. With such a comprehensive source of materials on hand, the evaluator may readily proceed to step two of the individual evaluation planning process.

Step 2: Examination of Referral Information

At this stage, the evaluator should begin to thoroughly study the details of the referral information. In so doing, he develops a basic understanding of the client's needs and interests as well as the purpose of the evaluation. For example, after reviewing Appendix A, one can see that several of the client's needs and interests have been identified.

1. He wants to develop a vocational objective.
2. He wants to train for a vocational objective if necessary.
3. He wants to obtain a job.
4. He may need special help adjusting to the center.
5. He wants to establish new social relationships, especially with girls.
6. He is interested in mechanical and communications work.

Additionally, the evaluator can see that the purpose of the evaluation is to assist in developing a vocational objective and determining if training is needed and if it is available at the center.

Thus, one can see how the referral information provides a basis for the evaluator's understanding of some of the client's needs as well as why he has been referred. However, even with the provision of detailed referral information, the evaluator may still have some questions about the client's background. In this case, the evaluator may want to contact some of the client's previous employers and find out what specific skills and duties were involved in the jobs he had and why he received no regular wages. This additional work could result in obtaining more detailed information. For example, the evaluator might find that as a filling station helper the client actually spent most of his time cleaning the rest rooms and sweeping the garage rather than servicing customers' cars. In this case, his work experience is really more closely related to custodial work than mechanics, and this observation may have important ramifications for developing vocational goals.

Another example involves a situation wherein referral information from different sources is in conflict. For example, a psychologist's report might indicate that there is no evidence of any psychological impairment, whereas reports from the family indicate that the client has displayed very bizarre behavior patterns at times. In such a case the evaluator would be wise to contact the referral source along with the family and psychologist and attempt to clarify their observations so that the evaluation staff might anticipate any problems that could arise, as well as obtain an integrated picture of the client.

Once the evaluator has thoroughly reviewed all the referral information and obtained any additional information he deems necessary, he should have a relatively accurate understanding of the client's needs, abilities, and limitations, and may, therefore, begin to identify specific questions which the evaluation should attempt to answer.

Step 3: Identifying Referral Questions

During the process of identifying client needs and developmental background, the evaluator also begins to formulate ideas about the needs of the referral source in terms of noting specific referral questions. As mentioned previously, the initial referral questions are the responsibility of the referral source, but if the referral source fails to clearly identify these questions, then the evaluator must assume responsibility for developing the majority of referral questions. Once the evaluator has a clear understanding of exactly what the referral source wants and the overall purpose of the evaluation, each referral question should be written into the IEP.

In our example, the counselor has identified several referral questions. They, in turn, have each been written in the sample IEP (pp. 37-38) and are noted under the section, Referral Questions to be Answered. They include questions 1-6:

1. How does the client adjust to new situations, individuals, and groups?
2. Does the client apply his ability to learn?
3. Does he follow through and master material assigned to him?
4. Is his writing limitation a big obstacle?
5. What can he do best within his limitations?
6. Is vocational training needed and where is it available?

It should also be noted that although the majority of these referral questions were noted in Section 2, Programming, of the initial referral information (see Appendix A), oftentimes the questions will be scattered throughout the referral information. Even in these cases, it still remains the responsibility of the evaluator to identify and understand all of the referral questions. If the evaluator should assume that all the information the referral source is requesting will be clearly and neatly identified, it is quite likely that he will overlook some important questions.

One should also note that there are additional referral questions listed on the sample IEP which were not developed by the referral source. Question number seven is an example of a referral question asked by the evaluator and based upon his review of the client's background. It asks, "What are his job seeking skills?" This question is the result of the evaluator's observation that the client has never held a competitive job; therefore, it is possible that he has never learned about the job seeking process. It is certainly a legitimate question since limitations in this regard could prove to be significant barriers to employment. Additionally, because assessing these factors will not significantly alter the original purpose of the evaluation, the question has been added without consultation with the referral source.

It should be emphasized that in order to avoid confusion, referral questions should be as specific as possible. If the evaluator is uncertain as to exactly what information the referral source is requesting, the former should

contact the latter and have the question clarified. This will insure that both the evaluator and the referral source have the same goals and objectives in mind before the evaluation begins.

Several examples of how vague referral questions may be revised and made more specific are noted below.

Original Question	Revised Question
1. "What are his work capabilities?"	1. "In what job areas can he perform competitively?"
2. "Can he lift heavy objects?"	2. "Can he continuously lift objects of up to 50 pounds for periods ranging up to three hours?"
3. "Can she live independently?"	3. "What are her budgeting, purchasing, banking, money handling, cooking, and transportation usage skills?"
4. "What are his interests?"	4. "What are his expressed and tested job interests?"
5. "What are her basic educational skills?"	5. "Are her reading, writing, and arithmetic skills adequate for working as a supermarket cashier?"
6. "Is he a dependable worker?"	6. "Does he complete all assignments and show good attendance and punctuality?"
7. "With job training could he become a mechanic?"	7. "With job training at ABC Trade School could he become an auto mechanic?"

With regard to referral questions, there are five important points to keep in mind:

1. Each referral question must be written into the IEP.
2. Referral questions should be as clearly stated and as specific as possible.
3. Referral questions may come from both the referral source and evaluator.
4. Additional referral questions may be added during the actual assessment process (this point will be discussed in Step 7, Plan Modification).
5. Where possible, additional information should accompany the referral question so that the evaluator understands the basis and background of the question.

With regard to point number five, the referral source might indicate that in reference to question number two, noted above, he is specifically interested in placing the client in a job as a bricklayer's helper. This additional information can be an asset to an evaluator in terms of assessing specific client capabilities.

Step 4: Identifying Appropriate Evaluation Techniques

Once the evaluator has a clear understanding of each of the referral questions and has written them into the IEP, he should then proceed to the next step. Step 4 involves choosing the assessment techniques and instruments which will answer the referral questions in as effective and efficient a manner as possible.

This is the stage wherein the evaluator's professional expertise becomes crucial, since choosing the wrong assessment procedures may result in failure to obtain any meaningful information, or even worse, encourage a misinterpretation of the client's capabilities. Should this happen, the client's overall rehabilitation progress may be seriously impeded because he may be recommended for additional training, adjustment, or placement services which do not correspond with his capabilities. In some cases a client might even be denied rehabilitation services from which he could benefit.

Appendix B gives several examples of different assessment techniques which an evaluator plans to use in order to answer the referral questions initially asked in Appendix A. Note that to the outside observer, some of the assessment technique titles indicate that they obviously directly relate to the referral questions. For example, in regard to referral question number seven, "What are his job seeking skills?" the assessment techniques of filling out job applications and role playing an interview are obvious ways to assess his job seeking skills. On the other hand, referral question number two, "Does he apply his ability to learn?" is relatively less specific and the resulting assessment techniques are not as obvious measures as in the previous example. In this case, the automotive and plumbing work samples require pre-training scores, followed by a period of programmed self-instruction and ending with a post-training score. The evaluator believed that comparing pre- and post-training scores would provide a good measure of whether or not the client actually applied his ability to learn. Additionally, the problem solving task and following instructions exercise required that the client learn some new material and then apply what he learned to some practical situations. Once again, the evaluator felt these techniques would provide some information as to the amount of effort the client put into learning the material.

In addition to choosing the appropriate assessment techniques, this step provides a good point at which to begin some tentative scheduling. Note that right next to the assessment techniques, the evaluator has listed each expected administration date. Although these dates may change due to unanticipated factors (e.g., the client proves to be very slow at some tasks, he becomes ill, or another client disrupts his work), they provide a relatively stable schedule of activities which assists in making effective use of both evaluator and client time. Although CARF standards do not indicate that administration dates must be included in the IEP, this is often the most logical place for scheduling notations since it provides a ready reference for the evaluator's daily planning. In addition to this, after the evaluation is completed, it provides a concisely written record of when each procedure occurred.

Step 5: Listing Persons Involved and Clarifying Their Roles

As was suggested in Part II, one of the most important aspects of evaluation planning is assuring that all people involved in the client's plan understand what their roles and responsibilities are in regard to meeting the needs of the client. This stage of planning actually involves two points. First of all, the evaluator must note in the IEP who is involved in carrying out the plan. In our example, the persons involved in the administration of each assessment technique are noted in the last column. Secondly, and most importantly, there must be evidence that the people involved understand their roles.

Clarifying role responsibilities may be done in a variety of ways. As mentioned previously, the evaluator may wish to hold a staffing prior to the client's arrival so that each staff member's role can be thoroughly discussed and explained. The minutes of such a meeting would serve to indicate that people were made aware of their roles, or the evaluator may choose to contact each staff member individually, and informally explain their roles and possibly have them sign the IEP as is shown in the sample. If parents, teachers, etc., are involved, the evaluator may choose to contact them by phone; but whatever the case may be, there must be some documented evidence that not only each person involved in the evaluation is listed on the IEP, but that they also understand their roles. The end result of this process is that the evaluation will proceed in a smooth and orderly manner. It is not adequate to simply list the people involved as "evaluation staff" or "psychological services" since this is too general and provides little meaningful information. Such an approach tends to limit accountability on the part of the people involved.

It should be noted that Steps 1-5 take place before the client has begun the actual evaluation process. In some instances the client may have visited the facility as part of the screening process; however, in many other cases he will have had no personal contact with any of the facility personnel. As such, his involvement in the initial planning process is necessarily limited. Yet, effective initial planning is important for several reasons. Korn (1976) indicated that:

> The rationale for obtaining referral data well before the onset of the evaluator's activities is threefold. First, clients can initiate evaluation activities in a systematic manner as soon as they arrive at the evaluation center. As a result, client time is used more effectively, the evaluator is provided with immediate hands-on options for clients who are hard to manage, and the evaluator has some assessment task options when starting several clients simultaneously. Secondly, if referral information is incomplete or the referral question is vague, evaluators have adequate time to communicate with the referral source in order to obtain needed background data about the client, or to find out specifically what the referral source wants to know about the client. Lastly, the evaluator and facility have adequate time to prepare special programming or modify the physical plant to meet the needs of the clients with severe disabilities, as well as time for the staff to become oriented to the needs of individuals with particular handicapping conditions. (page 44)

Thus, one can see that the initial evaluation planning which takes place prior to the client's arrival is crucial to the assurance of a well coordinated vocational evaluation process. Yet, one should keep in mind that the initial planning period is only one segment of the overall individual evaluation planning process.

Step 6: The Initial Interview

In regard to the IEP, the initial interview serves three primary purposes. First, it allows the evaluator an opportunity to meet with the client and explain what will be taking place during the evaluation, why the evaluation is important, and how it relates to meeting his needs. Any questions the client has can be discussed and client/evaluator communication is, therefore, facilitated. More importantly, the initial interview provides the client with a basis for assuming an active role in the evaluation process and any future evaluation planning. For example, during the interview the client may express an interest in exploring an area which was previously unmentioned. The evaluator may then incorporate this additional information into the IEP. On the other hand, the client may indicate that he does not want to participate in a specific evaluation technique which had previously been included in the initial plan. In either case, the client is given the opportunity to actively participate in the planning process.

Second, the interview provides a method by which certain questions which might not otherwise be answered can be resolved. In our example, one question is related to what specific skills and duties were involved in his previous noncompetitive work experiences. The initial interview provides the evaluator with a viable technique for exploring this type of question. Similarly, other questions closely related to the client's employment potential may be answered during the initial interview. "Is he willing to relocate and if so, where? What transportation does he have available? Does he have enough financial support to allow him to participate in long-term training or is immediate employment necessary? Will he require additional medical services such as surgery, that would disrupt his work?" All of these questions are important considerations which can be thoroughly discussed and answered during the initial interview.

Third, the initial interview allows the evaluator to develop additional heretofore unexplored referral questions. For example, the client in this case might express an interest in doing bench work assembly in a large manufacturing plant even though he made no mention of this to the referral source. The evaluator might then add to his list of referral questions, "Can he perform assembly tasks at or near competitive rates?"

In other cases, the evaluator may observe behavior patterns during the initial interview, e.g., excessive anxiety, distractibility, confused thought processes, etc., which he may wish to study more closely during the evaluation in order to see if they are recurring patterns. Referral questions for each problem noted would be developed, i.e., "Is she anxious in group and/or individual work situations?"

From the aforementioned information, one can see that the initial interview has a variety of functions, but it basically provides a means for orienting the client, answering some existing questions, or it may prove to be a stimulus for asking additional, previously unidentified questions.

Step 7: Plan Modification

Although the IEP may be modified at any time during the evaluation, it is noted here because it generally occurs after the initial interview, since it is at this time that the evaluator gets direct feedback from the client. Generally speaking, plan modification is indicated when the information provided by the referral source does not correspond with that offered by the client or unanticipated behaviors or events take place.

For example, Appendix A shows that the referral source only lists the client's vocational goals as radio and drafting. However, suppose that during the evaluation the client observes other clients doing assembly work and then expresses a strong interest in this activity. Should the plan be modified so as to include some assessment of his assembly skills? The answer is yes because by adjusting the plan, the evaluator is attempting to better meet the needs of the client.

Other examples of plan modification might include instances wherein an evaluator chooses a set of assessment techniques which require reading, yet when the client arrives, the evaluator discovers that the client has no reading skills, in spite of the fact that this limitation was never reflected in any of the referral information. In this instance, the plan would have to be modified to meet the needs of the client; in other words, different assessment techniques which do not require reading would have to be listed on the evaluation plan or the evaluator might modify the instructional procedures of the assessment techniques already listed in the plan so that they do not require reading. In other cases, a plan may simply need to be modified due to client absences which interrupt scheduling.

Although CARF standards do not require that the reasons for any modifications be noted, it is, however, a good practice to list the reasons for each change somewhere in the evaluation record. Such information provides a valuable reference for understanding any change in the evaluation process should it be necessary to review it at a later date.

For example, if an IEP indicates that a series of scheduled work samples were deleted and never administered, it might be due to a variety of circumstances, e.g., the client was absent, lost interest in these areas, or refused to cooperate because they were group tasks. By noting the reasons on the IEP, anyone who reviews the plan can see the specific reasons why the plan was modified, thereby, gaining better insight into the plan's progress and the reasons for the evaluator's decision to make modifications.

Step 8: Formal Testing Begins/Plan Review

Once the evaluator has identified the referral questions, the assessment methods and procedures, people involved, review dates, and any plan modifications, he may begin the formal testing process. He will use the IEP which he developed in Steps 1-7 to serve as a guide in the administration of the assessment techniques noted on the IEP schedule.

Although, at this stage, the evaluator has a comprehensive written IEP available, remember that it is still open to modification since events might occur which would necessitate changes in the plan. For example, the client

might discover during the work sample testing that he is really not at all interested in an occupational area for which he initially expressed a strong preference. Such unexpected changes are not uncommon among clients with little or no work experience or who have superficial vocational preferences. A client may believe that he wants to be an auto mechanic simply because Uncle Bill is one; however, having never done that type of work before, the client quickly learns through work sample testing or job site experience that he actually dislikes that type of work. When this happens, the evaluator may choose to modify the plan so as to discontinue testing in that area so that other areas might be more thoroughly explored. In our example, the IEP reflects that this is what has happened. The evaluator discontinued the previously planned automotive mechanics work and substituted bench work for which the client expressed a strong interest.

In other cases the plan may have to be modified due to unforeseen problems. For example, once testing begins, the evaluator may observe that the client has several behavioral problems such as being easily distracted from his work, disturbing co-workers, leaving his work station, etc. In these circumstances the evaluator may decide to review the plan on a daily basis and substitute assessment techniques that require close supervision of the client for previously scheduled methods which would have allowed the client to work relatively independently. In any case, if the evaluation is to truly meet the needs of the client, the IEP must remain flexible at all times.

Obviously, during the testing phase, the client's performance is observed and recorded and his progress discussed with him. This provides the basis for review of the plan and determination of whether or not the evaluation is progressing in such a way as to achieve the plan's goals and objectives. Are the referral questions being answered and, if not, how can the plan be modified so as to better achieve this objective? Some evaluators may choose to have predetermined review dates. For example, an evaluator might choose to regularly review most clients' plan progress at the midpoint of the evaluation. Other evaluators may prefer to leave the review dates open so that review will only take place when the evaluator feels that it is needed. Still others will use a combined method of review wherein specific checkpoint review dates are noted during the initial planning period, and additional review dates will be added according to the progress of each individual case. Whichever review method is used, it should always be kept in mind that plan review is important, since it is only by assessing how well the goals are being met during the evaluation, that one may avoid ending an evaluation prematurely without obtaining adequate answers to the referral questions.

If an evaluator does not periodically review a plan, he may overlook significant trends that might be occurring during the evaluation. For example, through reviewing client progress, the evaluator might find that the client consistently performs poorly on tasks requiring extensive reading; however, he performs much better on similar tasks which do not require reading. By reviewing the plan, the evaluator is offered the opportunity to re-administer the reading oriented tasks in order to find out if the client's poor performance was due to lack of task related ability or difficulty reading for long periods. If the evaluator does not review the plan, it is likely that the client will finish the testing and probably leave the facility before the evaluator recognizes any significant performance patterns. Thus, interpretations of the client's performance are difficult and the evaluator has only a tentative understanding of some of the client's capabilities.

Another example is the case wherein the evaluator fails to review the plan, and the client consistently performs poorly on group tasks. When the evaluation is completed, the evaluator may make note of this problem, but because the testing has ended, he is unable to find out why the problem occurred. If he had reviewed the plan during the evaluation, he would have had the opportunity to not only identify the problem but determine what the cause was, e.g., peer pressure, distractibility, etc. A more complete understanding of the client is possible if the evaluator not only knows that a problem exists but why it occurs. Plan review, therefore, facilitates a thorough understanding of client performance.

Step 9: Client Performance Completed/Exit Interview

Because the evaluator periodically reviews the client's progress in regard to the IEP and regularly provides feedback to the client with regard to his performance, it should be relatively easy for him to determine when all the referral questions have been answered as thoroughly as possible and the client should, therefore, complete the evaluation. Shortly after the testing ends, the evaluator should meet with the client to summarize the overall results in meaningful, client oriented terms, as well as answer any questions the client may have. This process is called the exit interview, and like the initial interview, it may also serve as an additional evaluation technique. For example, in our sample IEP, one of the purposes of the evaluation was to assist in developing a vocational objective. The exit interview provides an excellent opportunity for the client and evaluator to work together in developing a vocational goal, as opposed to the evaluator simply making job recommendations without much input from the client. In this case, the exit interview is actually part of the IEP since it is one of the assessment techniques identified by the evaluator during the initial planning period. If one was to review the results of this evaluation, he might find that during the exit interview the client developed a vocational goal related to assembly jobs, rather than mechanics or communication which were initially suggested.

The exit interview can also serve as an assessment tool for determining how much the client has learned from the evaluation. This is an important point since CARF Standard 3.4.3.1.1.1.n indicates that the evaluation process should attempt to obtain information concerning "the individual's ability to learn about himself as a result of the information obtained and furnished through the evaluation experience" (CARF, 1978, p. 28). For example a client might be referred to a facility for the purpose of helping him see that his present vocational goals are unrealistic but other goals are achievable. A mentally handicapped client may want to be an electronics engineer, but given the opportunity to try this type of work as well as others, he begins to see that his skills are not appropriate for engineering work, but he can do other work. The exit interview provides a valuable mode by which to assess the extent to which a client's attitudes about his performance correspond with his work capabilities.

Step 10: IEP Completed

After Steps 1-9 have been completed, the evaluation planning process is essentially finished. Minimally, the evaluator should have a written record of:

1. the referral questions,
2. the assessment techniques and procedures utilized,
3. the people involved in carrying out the IEP and evidence that they were aware of their roles, and
4. review dates and modifications.

If the evaluator has this information available, then it should be organized in such a way that an outside observer could generally understand what took place, why, and who was involved. It should reflect the occurrence of an organized series of events which were designed to meet the needs of the individual client.

In the sample IEP, one can see that there were eight specific questions which were to be answered; specific assessment procedures were used to answer each question; those individuals that were involved in the plan were identified and aware of their roles; and plan modification and review dates are clearly specified. Results of each of the individual assessment procedures are not included in the IEP, nor are any recommendations or interpretations since this information should be available elsewhere in the evaluation data and final report. Listing such information in the IEP is not required since it often results in an unnecessary duplication of information which is already available. Report writing and dissemination of evaluation results are only peripheral to evaluation planning; however, a thoroughly documented IEP can be a useful adjunct to interpreting and reviewing results since it provides a concise and detailed summary of the entire evaluation process.

In Part III we have examined the ten steps involved in developing the individual evaluation plan. From this discussion, one can see that evaluation planning is a systematic, ongoing process which is always open to modification, and that the end result, the IEP, serves as the nucleus around which all other evaluation activities revolve. Without a well conceived IEP, the overall evaluation and any resulting interpretations or recommendations are likely to occur in a haphazard, unsubstantiated manner.

PART IV

Summary

From the aforementioned discussion, it should be understood that developing individual evaluation plans is important for two primary reasons. First of all, and most importantly, it provides a systematic and directed approach to meeting the unique needs of people requiring vocational evaluation services. Secondly, individual evaluation planning provides a flexible, ongoing process which results in a written record of the entire vocational evaluation process. It, therefore, strongly discourages the "shotgun" approach to vocational assessment, which typically involves giving every client every available assessment technique regardless of their individual needs.

Evaluation planning should not be practiced simply for the purpose of meeting program or administrative requirements. Rather it should be used because professionals in the fields of vocational evaluation and work adjustment have long recognized that only a systematic and directed approach to vocational evaluation can insure that individual rehabilitation needs will be met. The benefits of evaluation planning are many and far-reaching. Communication among the client, referral source, and evaluator is facilitated; accountability is enhanced; management is improved; specific goals are developed and program effectiveness, in terms of achieving individual client-oriented goals, becomes measurable. All of these advantages contribute to one important outcome; individual client needs are met in the most effective and efficient manner possible.

In developing the IEP, there are several important factors which should be kept in mind.

1. Obtaining complete referral information is essential and should be a cooperative effort between the referral source and the evaluator.
2. Identifying clearly defined referral questions is the key to good evaluation planning because it insures that the evaluation meets the client's needs.
3. The assessment techniques chosen by the evaluator must be appropriate with regard to the needs, limitations, and capabilities of the client.
4. Evaluation planning is an ongoing process, always open to review and modification.
5. The IEP is not a vague, nebulous concept. It has five clearly identifiable characteristics which include:

    a. It shall be written and based on the individual needs of the client.
    b. It shall have clearly stated questions that are to be answered.
    c. The assessment techniques and procedures shall be outlined.
    d. The people involved in carrying out the plan shall be identified, and there shall be evidence that they understand their roles.
    e. There shall be evidence of periodic review and any plan modifications.

It is hoped that this publication will provide a tool whereby vocational evaluators will begin to effectively practice individual evaluation planning. Evaluation planning is much more than simply filling out forms and recording information. Rather, it is a skill which requires considerable expertise on the part of the evaluator, and once implemented as part of a comprehensive

vocational evaluation program, effective individual evaluation planning will prove to be an invaluable asset in providing professional evaluation services which meet the needs of handicapped people.

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APPENDIX A[1]

An Example of a Well-Planned and Documented Referral to an Evaluation Unit from a Field Counselor

Referral Information Sheet[2]

1. Counseling Information:

   Problems of client that affect trainability and/or employability.

   A. Medical and Psychiatric:

      1. Psychological problems seem to have been resolved. Recommendation is to proceed with vocational planning.

      2. Limitations: In use of hands, has difficulty with fine movements. In use of legs, can walk and stand equipped with short leg braces.

   B. Social:

      1. Family: It is a positive influence, cooperative, and will help in whatever way it can.

   C. Psychological:

      1. Motivation: Good, positive. He wants to determine a vocational objective and train for it.

      2. Personality: (see special reports).

      3. Ability level: (see special reports).

   D. Education:

      1. Grade completed in school: 11th grade.

      2. Subject in which he succeeded best: Shop courses and mechanical drawing.

      3. See high school transcript.

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[1]Taken from Report No. 2, The Study Committee on Evaluation of Vocational Potential (1966), pp. 21-27.

[2]These materials were prepared and forwarded as initial referral information on a client by Mr. Joseph L. Finnerty, counselor, Division of Vocational Rehabilitation, Kansas, and were accompanied by a Medical Specialist's report, General Medical Report, Psychologist's report of examination, a Psychotherapist's report of contacts, and complete school transcript and records.

E. Vocational:

1. Present status: Client is not working because he does not have a skill that he can use that is within his limitations.

2. Work History:

Furniture stripping	-	7 months	-	no salary
Painter's helper	-	9 months	-	no salary
Filling station helper	-	12 months	-	no salary

3. Past Vocational Training:

Woodworking	-	3 years	-	high school shop
Mechanical drawing	-	1 year	-	high school course

4. Vocational Goal (client's):

Radio - mechanical and communications
Drafting

5. Vocational Goal (counselor's):

Possibly radio, photography, or something that would involve the client with people singly rather than groups.

6. Employment or placement opportunities most commonly available in client's area: Aircraft industry, small manufacturing, all services necessary in area of population of about 280,000.

2. Programming:

A. What we would like to know about our client from Center evaluation:

1. Medical and Psychiatric: (Adequate information at present).

2. Social: How does he adjust to the new situation, individuals, and groups?

3. Psychological: (adequate).

4. Educationally: Client has average ability to learn. Does he apply his ability; will be follow through and master material that is assigned to him? Is limitation on writing a big obstacle?

5. Vocationally: What can he do best within his limitations?

B. How might Center help client with special problems: This is client's first time away from home and he will need some special help at first. He will need one special, interested person to listen to him.

3. We would hope that the client could enter directly into training if a program can be established that would meet approval.

4. The client has a good general understanding of the Center's services, evaluation, vocational training, etc.

   Plan would be for Vocational Rehabilitation to pay the Center costs.

   The family would meet transportation, clothing, and personal needs of client.

SOCIAL HISTORY

I. Identifying Information

Name: _____ Address: _____

Age: 24 Sex: Male Education: Completed 11th grade

II. Reasons for Referral

Client would like to be admitted to Hot Springs Rehabilitation Center for vocational evaluation and possibly vocational training.

III. Present Situation of Client

This 24 year old, white male has completed 11 years of public school education. His physical limitation, Friedreich's Ataxia, limits the full use of hands and lower extremities. He walks fairly well; he cannot accomplish fine movements with either hand. He last attended school at the age of 20; since that time he has not been gainfully employed but has been occupied in busy work type of thing.

At present, this young man is anxious to do something vocationally. He needs a job trial evaluation to determine what he can do.

IV. Physical Characteristics

Client is 5 ft. 9½ in. tall and weighs about 115 lbs. Although limited in the full use of hands and legs, he does quite well in performing most movements. The use of short leg brace enables him to walk and stand for considerable periods. He can perform gross movements of the hands and some of the finer movements. His body frame appears wiry and spare, and he probably has more strength than he appears to have. His vision is corrected to 20/20. He is neat and clean in appearance.

V. Present Living Arrangements

Client is still living at home with his parents, father age 51, mother age 55. Since the client has never had any significant income, he receives his support from the parents. They would be considered as part of the low-middle socio-economic group. They have tried to be helpful in handling client, having met with little success; they are concerned about his future. They are cooperative in working with vocational rehabilitation.

VI. Family History

A. Father: _____, 51 years of age, is in good health. He has a high school education and has worked all his life in general contracting of construction and remodeling work. He is now self-employed. Attitude toward son: interested, desires to be helpful, and is asking for help and guidance.

B. Mother: _____, 55 years of age, is in good health. She has a high school education. Since marriage she has been a housewife and mother. She has assisted her husband as his business secretary at times. She is probably dominant parent and has been overprotective with client.

C. Siblings of Client:

1. Sister, 34 years of age, with 12th grade education. She worked as a sales girl for 10 years before marriage. Since marriage she has been a housewife and mother of three children. Her husband is a bookkeeper. They treat client like a child.

2. Sister, 33 years of age, with 12th grade education. She was married and has two children. She is divorced and supports herself and children through real estate sales work.

3. Sister, 31 years of age, has worked as a secretary. She married, divorced, and has one child. She remarried but was recently widowed. Her husband was an insurance salesman who died of a heart attack.

VII. Client's History

A. Birth and development: (to approximately age 6). Client, the fourth of four children, had three older sisters. He was seven years younger than the next oldest child. His physical disability developed from the time of birth.

B. Preadolescence: (6 to approximately 12). These, no doubt, were difficult years for client. He was shifted about in schools. A speech problem seems to have developed. Evidently emotional problems were present. There seems to have been little or no meaningful relationships with parents, teachers, or peers. Client seems to have resented being placed with the slower learning groups.

C. Adolescence: (12 to 20 approximately). During this period client seems to have tried to make an adjustment to his situation of being the oldest child in group or class. He formed some friendships at school, both boys and girls. He was active in a church group, and liked singing and summer camp. He and his father worked at hobbies, woodwork, and photography. It seems that he was overprotected by his mother at home and became resentful.

VIII. Academic and Vocational Training

Client started to public grade school at age of five years. He completed three years and at that time was placed in the "sunshine room" (special education) for one year. This placement was made because of speech problem and lack of progress.

At age of ten he was placed in the _____ school (school for retarded). He attended there for four years. He resented this school because he felt that he didn't belong there.

At age of 14 he was placed again in public school at the sixth grade level. He was older and larger than the other children and felt but of place but did seem to make a satisfactory adjustment. He went ahead to complete junior high school; he entered senior high and completed the eleventh grade. He dropped out of school at this point because he was 21 years of age and to stay in school he would have had to pay tuition and other costs.

He ways that he got mostly C's while in high school but got B's in the three years of woodworking. He enjoyed school, liked shop courses and mechanical drawing best. He had both girl and boy friends during his school functions and activities.

School work was limited by his limited ability to write. At the present time client says that he can't read his own writing.

IX. Work Experience

After leaving school at the age of 21 years, client has occupied himself as indicated:

He worked in a family shop project reconditioning used furniture. He received no salary. Client stripped furniture for seven months.

He worked as a painter's helper for nine months, painting trucks. He was paid a very small amount.

He has put in most if his time at a friend's filling station. He says that he helped operate pumps, operated lift, lube and grease jobs, washed cars, some light tune-up work. He must have done these jobs to a very limited extent as he was sometimes paid $1.00 per day. At other times he was given only his lunch.

X. Medical History

(See medical reports.)

Client was under the care of the family doctor during his early years.

He was referred to _____ Clinic doctors at the age of 12. He was equipped with leg braces. Corrective surgery was done on his feet. His condition is considered stabilized.

XI. Information Not Given Elsewhere

Client is a member of a christian church, Disciples of Christ. He seems to be anxious to do something vocationally and is most anxious to form new social relationships, especially with girls. The lad seems to accept his physical limitations and has been cooperative in working through his emotional problems. He has taken drivers education courses and can drive a car, but he has never obtained a driver's license.

He and his parents have studied the literature available on the Hot Springs Rehabilitation Center. They understand the services of evaluation and vocational training and feel that this Center will meet client's need.

XII. General Plan for Handling of Case

1. Medical evaluation)
2. Psychological evaluation) Completed
3. Need for psychotherapy pointed out and met.
4. Vocational evaluation:

   a. Testing and past experience indicate interest in the general areas of: mechanical; outdoor; persuasive; scientific; and artistic.

   b. Need is for a vocational evaluation based on job trial.

5. Vocational training:

   At same Center if training is available for the particular vocational objective.

6. Job placement:

   Probably at home, (_____), a city of 280,000, where there are openings for most skilled workers in areas of industry and services.

7. Later planning:

   After satisfactory placement has been made, it is hoped that client would become self-sufficient and capable of moving out on his own.

XIII. Sources of Information

Client, his parents, doctors, and the psychotherapist that client has been seeing during the past six months.

/s/ Joseph L. Finnerty
Vocational Rehabilitation Counselor

APPENDIX B

INDIVIDUAL EVALUATION PLAN

Client: Don Joe Evaluator: S. Smith Evaluation Period: Beginning: 8/1/78 Ending: 8/12/78

Review Dates: 8/4/78, 8/9/78, 8/12/78 Asterisk (*) denotes a plan modification.

Referral Questions to be Answered	Assessment Techniques	Administration Dates	Persons Involved
1. How does he adjust to new situations, individuals and groups?	1A. Initial Interview	1A. 8/1/78	1A. Smith
	1B. Group Assembly W.S.	1B. 8/2/78	1B. Smith
	1C. Behavior Identification Format	1C. Continuous	1C. Smith
	1D. 16 PF Form E	1D. 8/1/78	1D. Jones
	1E. Utilization of recreation time	1E. 8/3/, 5, 8, 10/78	1E. Ray
	1F. Career Awareness Class	1F. 8/3/78	1F. Smith
2. Does he apply his ability to learn? It is average.	2A. Following Written Instructions Exercise #1	2A. 8/2/78	2A. Smith
	2B. Problem Solving W.S.	2B. 8/4/78	2B. Smith
	2C. Automotive Mechanic Training W.S.	2C. 8/2/78	2C. Smith
	2D. Plumber's Helper Training W.S.	2D. 8/3/78	2D. Smith
3. Does he follow through and master the material assigned to him?	3A. Small Appliance Repair W.S.	3A. 8/5/78	3A. Smith
	3B. Toggle Bolt Production Area	3B. 8/5/78	3B. Bern
	3C. Job Exploration Kit	3C. 8/1/78	3C. Smith
	3D. Custodial Production Area	3D. 8/4/78	3D. Smith
	3E. Percentage rating of number of completed tasks out of all assignments	3E. Continuous	3E. Smith
4. Is writing a big obstacle?	4A. ABLE Spelling Form A	4A. 8/1/78	4A. Smith
	4B. Auto parts Salesman W.S.	4B. 8/3/78	4B. Smith
	4C. Message Clerk Job Site	4C. 8/4/78	4C. Smith

APPENDIX B (Cont.) Client: Don Joe

Referral Questions to be Answered	Assessment Techniques	Administration Dates	Persons Involved
5. What can he do best within his limitations?	5A. DAT Mechanical Apt. Form A	5A. 8/1/78	5A. Smith
	5B. DAT Space Relations Form A	5B. 8/1/78	5B. Smith
	5C. Measurement Skills W.S.	5C. 8/3/78	5C. Smith
	5D. Drafting W.S.	5D. 8/8/78	5D. Smith
	5E. Small Engine Tune-Up W.S.	5E. 8/8/78	5E. Smith
	5F. Brake Repair W.S.	5F. 8/8/78	5F. Smith
Delete	5G. Auto Lubrication W.S.	5G. 8/8/78	5G. Smith
Delete	5H. Tire Balancing W.S.	5H. 8/8/78	5H. Smith
	5I. File Clerk W.S.	5I. 8/4/78	5I. Smith
	5J. Radio Announcer W.S.	5J. 8/10/78	5J. Smith
	5K. Range of Motion W.S.	5K. 8/5/78	5K. Smith
6. Is vocational training needed and where is it available?	6A. Exit Interview	6A. 8/12/78	6A. Smith
7. What are his job seeking skills?	7A. Fill out a job application	7A. 8/10/78	7A. Smith
	7B. Role play a job interview	7B. 8/10/78	7B. Smith
	7C. Job Search Activity #1	7C. 8/10/78	7C. Smith
*8. Can he perform assembly tasks at or near competitive rates?	*8A. Crawford Small Parts	8A. 8/8/78	8A. Smith
	*8B. MRMT	8B. 8/8/78	8B. Smith
	*8C. Stout U-Bolt Assembly W.S.	8C. 8/9/78	8C. Smith
	*8D. Punch Press Operator Job Site	8D. 8/9/78	8D. Smith
	*8E. Lamp Shade Packaging Job Site	8E. 8/11, 12/78	8E. Bern

We, the undersigned, understand our roles in carrying out this plan.

Evaluator Signature: T. Smith Date: 7/27/78
Client Signature: E. Bern Date: 8/1/78
Signature: K. Jones Date: 7/27/78
Signature: T. Klug Date: 7/27/78
Signature: _____ Date: 7/27/78

APPENDIX C

INDIVIDUAL WRITTEN EVALUATION PLAN

Client: _____ Evaluator: _____ Review Dates: _____

Questions to be Answered	Methods	Administration Dates	Results	Persons Involved	Plan Modification

I have participated in the development of this plan and understand the purposes of this evaluation.

Client Signature: _____ Evaluator Signature: _____

APPENDIX D

INDIVIDUAL EVALUATION PLAN

Client:_____ Evaluator:_____ Sex:_____

Review Date:_____ Evaluation Period:_____ Disability:_____

Staffing Date:_____

Purpose of Evaluation:_____

Referral Questions	*Outcomes Code
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

*Outcomes Codes

W: Yes, this referral question was answered.

X: No, this referral question was not answered.

Y: Additional time is needed to answer this referral question.

Z: This referral question cannot be answered by any available assessment techniques.

We, the undersigned, understand our roles in carrying out this plan.

Client:_____ Date:_____

Evaluator:_____ Date:_____

Signature:_____ Date:_____

Signature:_____ Date:_____

Signature:_____ Date:_____

APPENDIX D (Cont.)

Assessment Method	Trial Dates			Referral Question Number	Results	Persons Involved
	#1	#2	#3			
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						

APPENDIX D (Cont.)

Plan Modifications

1. _____

2. _____

3. _____

4. _____

5. _____

Reasons for Plan Modifications — Counselor Contacted Yes/No

1. _____

2. _____

3. _____

4. _____

5. _____

Comments

_____

_____

_____

_____

_____

Client Signature: _____ Date: _____

Evaluator Signature: _____ Date: _____

APPENDIX E

INDIVIDUAL EVALUATION PLAN

Client: _____ Disability: _____ Referral Source: _____

Age: _____ Education: _____ Staffing Date: _____

Sex: _____ Evaluation Period: _____ Evaluator: _____

Purpose of Evaluation: _____

Referral Questions	Techniques	Persons Involved	Results or Modifications	Review Date